Licensing Standards and Best Practices In Child Care

June 2002

Alberta
CHILDREN'S SERVICES

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PREFACE

In Alberta, day care facilities must be licensed under the *Social Care Facilities Licensing Act*. The *Day Care Regulation* prescribes the standards for the operation of these licensed day care facilities.

This Licensing Standards and Best Practices in Child Care manual is intended to be a practical, plain language reference to assist in meeting the requirements set out in the *Day Care Regulation*. In this manual you will find the following information:

- Specific references to each section of the *Day Care Regulation*.
- An explanation as to why each section of the Regulation is important to the care and well-being of children.
- Measurable indicators and practice standards to help in meeting the minimum requirements of the Regulation.
- Current best practices in child care associated with each section of the Regulation.

If you have comments that would help us to make this manual more useful to you, please send us your suggestions using the comment form provided at the back of the manual.

If you wish to obtain a copy of the *Day Care Regulation* you may do so by contacting:

Alberta Queen's Printer
Edmonton: (780) 427-4952
Calgary: (403) 297-6251
On-line at: www.gov.ab.ca/qp

OR

Alberta Children's Services
On-line at: www.child.gov.ab.ca

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Finding Information In The Manual

Finding Information in the Manual

This manual contains the following information:

- **A reprint of each section of the Regulation**

  There are forty (40) sections in the *Day Care Regulation*. Each section is re-printed in this manual. You can use the Table of Contents at the front of this manual to find the page reference for each section of the Regulation.

  Section ...

  Text that appears in this type of shaded box has been re-printed from the *Day Care Regulation*.

  If you see any term printed in bold ***italics***, in the re-print section, please refer to the glossary at the back of this manual for a detailed explanation of the term.

- **An explanation of the intent of each section of the Regulation**

  Following each re-print from the Regulation, is an explanation of why that section of the Regulation is important to the care and well-being of children.

- **A list of indicators**

  Each bullet point in this list is an observable indicator that must be present in a day care facility for the facility to be in compliance with the Regulation.

- **Best Practices**

  This section highlights some of the most current "best practices" in child care. Adopting these practices will assist an operator to enhance the quality of child care provided in their facility. Please note that not all sections will offer best practice suggestions.

This symbol indicates the end of a section

DEFINITIONS

Section 1 – Definitions

Section 1

1 (1) In this Regulation,

(a) "Act" means the *Social Care Facilities Licensing Act*;

(b) "child" means a child who is under 7 years of age and who, except in the case of an individual attending an early childhood services program within the meaning of the *School Act*, is not a student within the meaning of the *School Act*;

NOTE: Day care centres may include school-aged children as part of the older age group within their licensed capacity. In situations where there are 4 or more school-aged children, a separate out of school care licence is required.

NOTE: A day care facility includes a day care centre, nursery school and drop-in-centre.

(c) "day care centre" means a facility that

(i) provides care, development, and supervision for 7 or more children for more than 3 but less than 24 consecutive hours in each day that the facility is operating, and
(ii) is intended to be operated for at least 12 consecutive weeks per year;

(d) "day care centre" means a facility that

(i) provides care, development, and supervision for 7 or more children
(A) for more than 3 but less than 24 consecutive hours in each day that the facility is operating, and

(B) for not more than 40 hours in any month for any child, and

(ii) is intended to be operated for at least 12 consecutive weeks per year;

NOTE: This defines a licensing category for centres that provide only casual or part-time care.

(e) "licence" means a licence, including a conditional licence, under the Act in respect of a day care facility;

NOTE: A conditional licence is one where conditions are stated on the licence that identify non-compliance to the *Social Care Facilities Licensing Act* or *Day Care Regulation* that must be corrected along with timelines for completion.

A conditional licence would only be issued in situations where the non-compliances do NOT place children in care at immediate risk or where compliance cannot reasonably be expected immediately (i.e. an outdoor play space cannot be built until spring).

(f) "licensed capacity" means, in relation to a day care facility, the maximum number of children that the licence permits to be accommodated or cared for in the facility;

(g) "nursery school" means a facility that

(i) provides care, development and supervision for 7 or more children for periods of 3 consecutive hours or less in any day, and

(ii) is intended to be operated for at least 12 consecutive weeks per year;

NOTE: This defines a licence category for part-time programs operating for 3 hours or less per day.

Nursery school programs that operate for 12 weeks or more or where there is an intent to provide an ongoing program, a licence is required.

(h) "parent" means, in relation to a child, the parent, guardian or adult person who enrolled the child in the day care facility program;

(i) "primary staff member" means, subject to ***sections*** 30 (5) and 33 (2), a staff member of a day care facility whose duty is child care and who is actively engaged in the supervision, safety, well-being and development of children;

NOTE: The definition of primary staff members excludes staff members involved in support functions such as touring parents, cooking, cleaning or clerical tasks.

(j) "program director" means a ***staff*** member of a day care centre whose duty is to provide on-site supervision of the daily operation of the day care centre;

NOTE: Supervision of the daily operation of the day care centre includes active involvement with, and overall responsibility for such things as: planning and directing the children's program; supervising staff; compliance with the standards contained in the Day Care Regulation and Licensing Standards and Best Practices in Child Care; and may include: administrative responsibilities (e.g. record keeping, staff scheduling, etc.; and direct child care).

(k) "qualification certificate" means a qualification certificate issued under ***section*** 25.

NOTE: The Minister of Alberta Children's Services or designate, is the only authority who issues qualification certificates to day care staff who meet the necessary criteria. The various levels of qualification certificates are outlined in section 25.

(k) For the purposes of the Act and this Regulation, "day care facility" means, in addition to a day care centre, a nursery school and a drop-in centre.

NOTE: These are facilities included within the definition of day care facility. However, this manual is primarily intended for day care centres.

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PART 1 - LICENSING

Section 2 – Eligibility for Licence

Section 2

A licence may be obtained or held only by

(a) an individual who is an adult
(b) a partnership, or
(c) a body corporate

NOTE: A "body corporate" exists when a corporation is formed under statute. For the purposes of owning a day care facility in Alberta, most commonly a corporation is formed under the *Business Corporation Act*, or is a non-profit organization incorporated under the *Societies Act*. In addition, a corporation could be incorporated under its own Act.

Section 3 – Contents of Initial Application

Section 3 (1) (a)

(1) An application for an initial licence must be in writing and include, in addition to the particulars and the required fee,

(a) a service plan that demonstrates to the satisfaction of ***a director*** the applicant's ability to provide a safe and effective child care program, and a description of

(i) the proposed child care program, including the child care philosophy on which the program will be based,

(ii) the delivery of the child care program,

(iii) the nature and scope of parental involvement in the child care program,

(iv) ***staff*** positions, responsibilities and qualification requirements,

(v) administrative policies and procedures, and

(vi) utilization of the indoor space and the outdoor play space of the day care facility, including furnishings and equipment

INTENT

All required information and the appropriate fees must be received before a licence is considered. The information from the application is used, in part, to determine that the applicant meets all regulatory requirements for a licence.

The Service Plan component outlines the applicant's understanding and ability to implement a program based on early childhood development and quality group care indicators.

INDICATORS

- The day care centre has received approval of their service plan as part of the licensing application process.
- Written information for parents contains details about: the day care's child guidance methods; evacuation procedures; child care philosophy; approaches for facilitating children's development; and how parents can access recent inspection reports.

BEST PRACTICES

- A copy of written information for parents is provided to the Child and Family Services Authority for approval.
- A service plan has been developed based on regional guidelines for developing service plans.
- Recent inspection reports are posted and available for parents to view at the day care centre.
- A staff handbook is provided to all staff.

Section 3 (1) (b)(c)(d)(e)(f)

(1) An application for an initial licence must be in writing and include, in addition to the particulars and the required fee,

(b) evidence of general liability insurance coverage for the staff and children,

(c) evidence of municipal zoning approval,

(d) a satisfactory health inspection report from the regional health authority in which the day care facility is to be located,

(e) evidence of compliance with all applicable regulations under the *Safety Codes Act*, and

(f) in the case of a day care centre, the names and qualification certificate numbers of the program director and each primary staff member.

INTENT

Parents, children and staff need to be assured that there is sufficient liability insurance and that the facility meets all health and safety requirements. The intent of this section is to ensure that all requirements are submitted prior to a licence being considered.

NOTE: Appendix A of this manual provides details of the requirement for completing a criminal records check. Day care facilities are required to develop a process for completing criminal records checks of all staff. In addition, all license applicants must provide evidence of a current criminal records check.

INDICATORS

- Satisfactory approvals for municipal zoning, health, building and fire standards have been received.
- Names and staff qualification certificate numbers for all staff have been submitted.

BEST PRACTICES

- Copies of the required approvals are maintained on site.
- Copies of qualification certificates or exemption letters of staff currently employed in the centre are posted.

Section 3 (2)

(2) The fee for an initial licence is $35.00.

INTENT

A nominal fee accompanies the application form.

INDICATORS

- The Child and Family Services Authority has received an application form and fee.

Section 4 – Renewal of Application

Section 4 (1)

(1) An application for renewal of a licence must be in writing and include, in addition to the particulars and the required fee, notification of any change in any of the information previously provided under ***section*** 3 or under this ***section***.

Intent

All required information and any changes to previous information is submitted prior to a licence being renewed.

Indicators

- Any changes to the program are submitted in writing as part of the renewal process.

Best Practices

- Application is submitted three months prior to expiry of the current licence.

Section 4 (2)

(2) The fee for a licence renewal is $25.00.

INTENT

A nominal fee accompanies the application form.

INDICATORS

- The Child and Family Services Authority has received an application form and fee.

Section 5 – Licensed Capacity per Facility

Section 5 (1)(2)

(1) Subject to subsection (2), ***a director*** may not issue a licence permitting a licensed capacity of more than 80.

(2) Where a licence in force on November 30, 1990 permitted the operation of a day care facility with a licensed capacity of more than 80, ***a director*** may renew that licence and make further renewals of licences in respect of that day care facility notwithstanding that the licensed capacity exceeds 80.

INTENT

To limit the number of children at any one time in day care facilities, while allowing facilities previously licensed for more than 80 child care spaces to continue to be licensed for that number.

INDICATORS

- The number of children in care does not exceed the licensed capacity of the facility.

PART 2 - FACILITIES AND THEIR OPERATION

Section 6 – Accommodation

Section 6 (a)

A ***licence holder*** must ensure that

(a) in the case of a day care facility

(i) washrooms and washroom fixtures are conveniently located and easily accessible to children, and

(ii) each room used for child care purposes has a layout that is conducive to effective supervision,

INTENT

Children need to be cared for in an environment that is safe and ensures they can be well supervised at all times. Children's play areas must be arranged in such a way that children are directly supervised by staff who are aware of where children are at all times. Children need to have easy access to washrooms and washroom fixtures to ensure that their developmental needs are met and that proper hygiene is followed.

INDICATORS

- Washrooms are located where children can easily access them from both indoor and outdoor areas.
- Child-sized washroom fixtures are provided, or when adult-sized washroom fixtures are present, proper, safe and easily cleaned raised equipment is provided to allow children to easily access the fixtures.
- Staff can observe children over the top of any space dividers (including cupboards when they are used as dividers).
- The playroom layout allows staff to see and directly supervise children at all times. It is recognized that in some types of play (i.e. crawling through play tunnels), children are, for short periods of time, out of sight.

BEST PRACTICES

- The operator shows parents the layout of the day care during orientation and explains how the environment has been designed to ensure children are supervised at all times.
- The operator shows parents the location of the washroom and explains how washroom fixtures are safe and accessible for children.
- Staff are aware that the room layout is planned to enable them to see children at all times.
- Any changes or modifications to the room layout are done with supervision in mind.

Section 6 (b)

A *licence holder* **must ensure that**

(b) in the case of a day care centre and drop-in centre, there is adequate space provided for administrative and ***staff*** needs.

INTENT

Staff, parents and other adult visitors to the day care centre/drop-in centre need to have access to private spaces that are separate from those occupied by children. Staff need to be able to meet their personal needs, as well as conduct interviews or meetings and carry out administrative tasks, in adult oriented space (i.e. a separate staff room, storage area for staff's personal belongings, and a separate adult washroom).

INDICATORS

- Day cares and drop in centres licensed prior to December 1, 1990 may use the kitchen area as a staff room provided that a space has been set up away from the food preparation area and food is not being prepared at that time.
  OR
- Day care centres/drop-in centres licensed after November 30, 1990 provide a private space that is specifically designated and equipped for staff use.
- There is a separate adult washroom available.
- A separate space is designated for administration activities and files.

BEST PRACTICES

- The day care centre has a comfortable space separate from space used for children's activities that is available for adult conferences and group meetings.
- There is a private office equipped with adult-sized furniture and secure file storage.
- A secure area is provided for staff to store their personal belongings.

- A telephone is accessible for staff use.
- A separate adult lounge area equipped with adult furniture is available for staff throughout the entire day.
- A separate adult lounge area equipped with adult furniture is available for staff throughout the entire day.

Section 7 – Net Floor Area

Section 7 (1) (2) (3)

(1) A ***licence holder*** must provide a net floor area of not less than

(a) 3 square metres per child in the case of a day care centre, or
(b) 2.5 square metres per child in the case of a nursery school and drop-in centre.

(2) For the purposes of subsection (1), the net floor area must be calculated

(a) by measuring floor space that is appropriate for use by children when playing, resting, sleeping and eating, and
(b) on the basis of licensed capacity.

(3) Notwithstanding subsection (2), the net floor area of a day care facility in respect of which a licence was in force on November 30, 1990 must be calculated by measuring usable floor space, including unencumbered hallway space but not including the stairwells, kitchens, offices, staff rooms, storage rooms or half of the washroom space.

INTENT

Children require an environment that is large enough to provide for all their developmental needs. To ensure that each child has a minimum amount of space available for playing, eating, resting and sleeping, it is essential that space be measured to determine that the day care facility has the capacity for these purposes. Space requirements are tied to the approved licensed capacity.

The intent of subsection (3) is to allow facilities licensed prior to December 01, 1990 to continue to be measured based on previous criteria.

INDICATORS

- Lofts and floor space beneath them are measured only once as a single space.
- The number of children in a playroom does not exceed the number that is allowed except for a special occasion, when there may, from time to time, be more children in a room than the area (m^2) allows. This type of event is pre-scheduled, takes place only occasionally and requires the attention of all the children to be focused on a common event.
- Any proposed changes to the net floor area are reviewed with the Child Care Specialist prior to implementation.
- When there is a change in licence holder, for facilities licensed prior to December 1, 1990 the criteria used to calculate net floor area remains as defined in section 7(3).
- When a licence holder relocates to a new site, the criteria used to calculate the net floor area is that described in section 7(1) and section 7(2).
- When significant renovations impact floor space, the criteria in section 7(1) and 7(2) are used to re-measure space that is used for playing, resting, sleeping, and eating.
- Floor space is measured up to the edge of cubbies and other fixed shelves. The space occupied by these shelves and cubbies is not included.
- When cubbies are in a separate room or if they are organized in such a way that forms a separate area, then the entire cubby area is not included in the calculation of usable floor space.
- All playrooms are large enough to accommodate the basic interest centres.

BEST PRACTICES

- Space exceeding the minimum requirements is available.
- Play spaces have natural lighting and proper ventilation.
- Traffic patterns do not interfere with activities.
- Infant rooms include an open area for crawling, walking and play.

- Infant rooms exceed the 3 square metres per child requirement to accommodate space needed for cribs and other special infant equipment.
- Floor services are suitable for a variety of activities (i.e. carpet and linoleum).

Section 8 – Furnishings and Equipment

Section 8 (1)

(1) A ***licence holder*** must ensure that indoor and outdoor furnishings and equipment, including play materials, are safe and maintained in good repair, are developmentally appropriate and are of sufficient quantity and variety for the number and ages of the children cared for in the day care facility.

INTENT

Many factors need to be in place to ensure a safe and developmentally appropriate environment for young children.

SAFETY

To ensure children's safety; furnishings, equipment, and play materials accessible to children both indoors and outdoors, must be maintained and presented in such a way that children are able to freely explore their surroundings without encountering potential hazards. Appropriate maintenance of play materials will ensure that children are safe and that they will obtain the maximum benefit from the play materials.

DEVELOPMENTALLY APPROPRIATE

Furnishings and equipment appropriate to the children's physical size and level of development are essential to meeting children's needs in all areas of development. The environment must be set up in such a way that considers size and level of development to allow children to be independent. Easily accessible play materials that are age/developmentally appropriate allow children to make independent choices and be successful with the materials they choose. Individual children's needs can be met in a group setting without unnecessary sharing and waiting when equipment is available in sufficient quantities. Activity centres provide essential developmental

experiences and should be changed from time to time to ensure a continuous variety and an interesting environment.

Outdoor

Outdoor play equipment and materials often present unique safety concerns and warrant careful monitoring particularly regarding head/neck entrapments and entanglement hazards. Children are protected from injury due to falls in an outdoor play space when appropriate cushioned surfacing is in place under and around climbing structures/slides and swings. The Canadian Standards Association, in their 1998 CSA "*Children's Play Spaces and Equipment*" standards, provides specific guidelines on ensuring playground safety that should be considered when assessing the safety of outdoor play areas and equipment.

Indicators

Safety

- All furnishings, equipment and play materials are in good repair and free of any hazards.
- Furnishings and equipment are organized, positioned and used in a way that protects children from potentially hazardous items (i.e. shelving is secured to prevent tipping; cupboards used for storage of cleaners, disinfectants and other potentially hazardous products are equipped with a latching device that makes them inaccessible or these materials are stored at a height that prohibits child access).
- All high chairs are equipped with safety straps to secure infants.
- Change tables have safety straps or an appropriate barrier.
- All furnishings, equipment and play materials are regularly cleaned and / or disinfected where appropriate.

Developmentally Appropriate

- Children's furnishings and equipment are proportioned to the size of the children (i.e. chairs are small enough for children to get on and off independently; sleeping cots or mats and diaper changing mats or tables are large enough for a child to lay comfortably and accommodate typical movement).

- Furnishings and equipment are provided in adequate quantities to meet the needs of the children, (i.e. enough tables and chairs to accommodate all enrolled children at one time; enough high chairs are available to accommodate individual eating schedules; sleeping cots or mats are available for all children requiring one).
- Activity centres include dramatic play, quiet area, manipulative toys, blocks and floor play, art, gross motor, water and sand.
- Activity centres are set up with a variety of play materials that promote all areas of child development (social, physical, intellectual, creative and emotional).
- Activity centres are organized so that children can choose and access play materials with minimal assistance (i.e. low shelves, open bins, etc).
- Activity centres and equipment are changed periodically to allow for variety.

OUTDOOR

- Outdoor equipment is at a height suitable for the age and height of the children who use it.
- Outdoor play space is maintained and monitored prior to use by the children.
- Outdoor play equipment is free of all safety concerns including head /neck entrapment and entanglement hazards.
- Cushioned surfacing that meets the CSA Guidelines is in place under and around climbing structures/slides/swings.
- Cushioning material is maintained in a non-compacted condition of an adequate depth or, where synthetic surfaces of manufactured materials are used (must conform to CSA Guidelines), they are installed according to manufacturers' instructions.
- A shaded area is available (i.e. trees; building; awning; umbrellas; etc.).
- Outdoor activity centres are developmentally appropriate, provide a variety of play opportunities, and offer an extension of the indoor program.
- All equipment is positioned to avoid collisions between children using different pieces of equipment and conflicting kinds of play.

BEST PRACTICES

SAFETY

- A routine daily maintenance and safety inspection of the facility and outdoor play space is completed to ensure that potential hazards are addressed immediately.
- Toys and equipment are inspected routinely during periods of use and non-use to ensure that any potential hazards are identified and responded to appropriately before problems arise.
- Procedures and practices are in place for regular cleaning and disinfecting of furnishings, equipment and play materials.

DEVELOPMENTALLY APPROPRIATE

- Supplementary activity centres are introduced in addition to the basic required centres to offer new and exciting experiences for the children. Some examples of supplementary centres are as follows:

    - Science and Nature Centre: including magnifying glasses, magnets, balance scale and weights, aquarium or live animals, plants, etc.
    - Discovery and Curiosity Centre: including typewriter, old radio, clock, bird's nest, honeycomb, etc.
    - Puppet Centre: including a puppet theatre, puppets, props and accessories.
    - Carpentry Centre (for children 4½ and older): including woodworking bench, variety of tools, safety goggles, nails, wood scraps, vice, wood glue, sandpaper, etc.
    - Theme based prop boxes to create additional activity centres such as a post office, hospital, store, beauty shop, etc.

OUTDOOR

- A variety of ground surfaces are available outdoors to encourage a range of activities (i.e. hard surfaces for tricycles and riding toys; grass for running and group games).
- Separate outdoor areas are provided for infants and toddlers with age appropriate equipment.
- When outdoor space is shared with a range of age groups a schedule is in place that prevents overcrowding.

- All outdoor play structures comply with the standards outlined in *"A Guideline on Children's Playspaces and Equipment, CSA Standard (CAN/CSA – Z614 – M90)"*. This document is available from Canadian Standards Association, 178 Rexdale Boulevard, Rexdale, Ontario, M9W 1R3.

Section 8 (2)

(2) Each child under 13 months of age must be provided with a separate crib that complies with the *Cribs and Cradles Regulations* (SOR/86-962) made under the *Hazardous Products Act* (Canada).

INTENT

Nap and rest times for children under 13 months of age may vary from day to day. To accommodate these fluctuations, children of this age need to have access to their own separate crib for use while in care. Cribs that meet all federal safety standards will ensure children are not exposed to outdated or unsafe equipment.

The changing needs of growing children, over 13 months, may include cribs, cots or mats.

INDICATORS

- A crib that meets federal safety standards is provided for the individual use of each child under 13 months of age during all their hours in care.
- All cribs available for children over 13 months meet the federal safety standards.
- If cribs are shared, they are sanitized between use and individual bedding is used for each child.
- Cribs, cots and mats are constructed of materials that can be kept clean and sanitized.
- Bedding is clean, dry and sanitary.

BEST PRACTICES

- Cribs for children under 13 months are located in a quiet area that accommodates individual sleeping schedules and allows children to sleep undisturbed.

- For children over 13 months of age parents and staff discuss the child's readiness to move to a cot or mat.
- Staff receive training on the care of young infants and are provided with detailed information regarding Sudden Infant Death Syndrome.
- Staff always place young infants on their backs for sleeping and monitor them frequently.

Section 9 – Outdoor Play Space

Section 9 (1)(2)(3)

(1) A ***licence holder*** for a day care centre must provide outdoor play space that is adjacent to or within easy and safe walking distance of the day care centre and accommodates at least 50% of the licensed capacity at a level of not less than two square metres for each child under 19 months of age and not less than 4.5 square metres for each child who is 19 months of age or over.

(2) Subject to subsection (3), the ***licence holder*** must ensure that

(a) the play space referred to in subsection (1) is securely enclosed on all sides, and

(b) all entrances to and exits from the play space that do not lead into the interior of the day care facility are kept closed at all times while children are using the play space.

(3) In the case of a day care centre located on public property, ***a director*** may exempt a ***licence holder*** from any requirement of subsection (2) if the ***licence holder*** satisfies the director that

(a) play space that meets the requirements of subsection (2) is not reasonably available, and

(b) the children will be adequately supervised and protected in the play space provided under subsection (1).

INTENT

It is important that children have access to outdoor play on a daily basis. The outdoor play space needs to be safe, versatile, well maintained, and planned to meet the developmental needs of children. For ease of access, outdoor play space should be adjacent to the day care. Where that is not possible, it is required to be within easy and safe walking distance of the day care centre. To

ensure the safety of children, the outdoor play space must be securely enclosed whenever children are using the play space.

Day cares located on public property may be exempt from having outdoor play space that is securely enclosed. However, it is essential that children are adequately supervised and protected in the alternate play space.

INDICATORS

- The entrances and exits are kept closed at all times when children are using the outdoor play space.
- Fences and gates have secure fasteners that preschool children cannot open but which can be opened to exit in the case of an emergency or the facility has an approved exemption from the requirements for a securely enclosed outdoor space if located on public property.
- Staff are positioned strategically on the playground in order to supervise all children at all times.
- The outdoor play space can accommodate at least 50% of the licensed capacity at any one time.

BEST PRACTICES

- Children use the outdoor play space on a daily basis.
- Outdoor play activities take place during all seasons with appropriate planning for the weather conditions.
- If the outdoor space is measured for 50% of the licensed capacity, then only 50% of the licensed capacity uses the outdoor play space at any one time.
- Staff are encouraged to participate in children's play (i.e. pulling children in a wagon).

Section 10 – Child Care Program

Section 10 (a)

A ***licence holder*** must

(a) provide a child care program that is in keeping with the physical, social, intellectual, creative and emotional needs of the children

INTENT

The early years are important in the life cycle of brain development and set the base for competence and coping skills that affect learning, behaviour and health throughout life.

Child care programs need to provide an age-appropriate environment. This environment encourages growth in children's individual stages of development.

Young children need care and nurturing. They need attention to their health and nutrition, their evolving emotional and social abilities, as well as their intellectual ability. Children should be challenged to master progressively more complex levels of moving, thinking, feeling and creativity.

This section addresses five components for the child care program:

PHYSICAL NEEDS are characterized by the need to develop a variety of age appropriate physical skills. Adequate nutrition, rest, health and safety are also considered as physical needs.

SOCIAL NEEDS include opportunities for children to develop social skills through interaction with peers and adults. Children need to function as a group member and learn appropriate social behaviours.

INTELLECTUAL NEEDS consist of the importance of children exploring, observing, knowing and understanding objects and events in their daily environment. Intellectual needs also include the development of language skills.

CREATIVE NEEDS addresses the need for children to think creatively through the use of experiences to produce new ideas. The need for creative self-expression, creative problem solving, invention, discovery and experimentation is important and relates to all areas of children's development.

EMOTIONAL NEEDS take into account that children need to be accepted, respected and secure for their emotional well being. Children need to be independent, demonstrate initiative, express anger appropriately and cope with frustrations. Children need to give and receive affection.

INDICATORS

PHYSICAL NEEDS

The child care program includes:

- A variety of age appropriate fine and gross motor activities for both indoor and outdoor play.
- Safe activities to promote physical competency and coordination through a variety of accessible toys, materials and equipment for gross motor activity.
- Opportunities for sensory experience.
- Opportunity for adequate nutrition and rest.

SOCIAL NEEDS

The child care program includes:

- A balance of individual, one-on-one and small group play opportunities.
- Opportunities for social interactions with other children and adults.
- Opportunities for children to identify and express their feelings appropriately.
- Opportunities for children and adults to listen and respond to each other.
- Modelling of appropriate social behaviour that illustrates respect, concern, and consideration of others in thought, word and action.

Intellectual Needs

The child care program includes:

- Opportunities for children to explore their environment and communicate with others.
- Opportunities for children to actively engage in a variety of experiences that enhance each child's capacity for thinking, reasoning and questioning.
- Opportunities for children to use and hear language, explore and problem solve.

Creative Needs

The child care program includes:

- A sufficient number and variety of safe materials and equipment for stimulating play experiences.
- Encouragement, acceptance, and acknowledgment of each child's unique way of expressing creativity.
- Opportunities for creative self-expression and creative thinking.

Emotional Needs

The child care program includes:

- A predictable daily routine that is sufficiently flexible to allow for individual preferences and independent choices.
- Staff who assist children to recognize, express and accept a range of feelings.
- A safe, secure and positive environment where children and staff give and receive affection.
- Staff who assist children to develop self-control, express anger and other feelings appropriately and cope with frustration and failure.
- Opportunities for children to engage in activities that allow them to feel genuinely successful and other opportunities for them to feel challenged.

BEST PRACTICES

- There are opportunities to support children's home culture and language.
- Daily/weekly schedules provide for extended periods of open-ended play.
- Staff meet identified special needs of individual children and consult with appropriate specialists.
- Parents are welcome in the program and participate in decisions regarding their children's care.
- The day care facility is familiar with a range of resources and are able to link families with appropriate resources based on an identified concern.

A NOTE ABOUT INCLUSIVE CHILD CARE ...

Child care settings include children with diverse backgrounds and abilities. Inclusive practice in child care occurs in an environment where there is acceptance and appreciation of diversity and respect for all children as individuals. The inclusive environment incorporates and supports the planning, promoting, and provision of developmentally appropriate care for all children.

Inclusive child care settings have positive impacts on children's development, not just for children with special needs, but also for typically developing children. All children need a sense of belonging for self esteem and healthy child development. Children in inclusive child care settings become more sensitive, compassionate and accepting of diversity.

Promoting continuity of group membership and feelings of belonging to the group is given high priority. Children with special needs have access to the same types of experiences as children without special needs, but may require extra supports in order to be included with their peers. Additional resources and supports may be necessary to enable the effective inclusion of children with special needs.

Children with special needs, working and playing along with typically developing children, learn many skills. Staff become more knowledgeable and skilled in caring for a broader range of children.

Section 10 (b)

A ***licence holder*** must

(b) submit any proposed change in that program to ***a director*** for approval before implementing the change.

INTENT

Children need stability, consistency and predictability to attain a sense of security in their environment. Any significant change such as program philosophy or renovations to playrooms requires a well thought out process, identification of any impact to the children in addition to an approval to proceed.

INDICATORS

- All significant changes to the child care program are submitted and approved prior to modifications to the program or environment.

BEST PRACTICES

- A written proposal for requested changes to the program is submitted one month prior to the requested date of a change.
- The requested change is based on research and best practices.
- The impact of a change is monitored and altered as necessary.
- The child care staff and parents are involved in the planning of a proposed change.
- The child care staff and parents are advised of a change prior to implementation.

Section 11 – Child Guidance

Section 11 (1)(2)

(1) A ***licence holder*** must ensure that

(a) child guidance methods are communicated to a parent of each child, and

(b) any child guidance action taken is reasonable in the circumstances.

(2) No person may use corporal punishment against a child under any circumstances.

INTENT

Growing children need guidance to help them make appropriate behaviour choices. Day care staff have both the opportunity and responsibility to use child guidance strategies that encourage self-control, self-respect and respect for others. Any child guidance needs to be reasonable in the circumstances and consistently followed by all staff.

Parents need to know the child guidance methods that are used by the day care.

Both parents and staff need to understand that the use of corporal punishment is prohibited under any circumstances.

"Corporal Punishment" is defined as any type of physical punishment. It includes shaking, pushing, slapping or spanking. Any form of contact that is intended to ridicule, humiliate, degrade, insult or undermine the dignity and self-worth of a child is also a form of "corporal punishment".

INDICATORS

- There is a defined method for how child guidance practices are communicated to parents.
- All staff have received an orientation in the child guidance practices used in the day care.
- Approved child guidance strategies are followed at all times.
- Children are guided and encouraged to act in appropriate ways.
- Corporal punishment is never used or condoned.
- Positive guidance strategies are offered to children to reinforce their appropriate behaviours and encourage cooperation.
- Prevention and intervention strategies are used in providing child guidance.
- All child guidance strategies respect the self-esteem of the children.
- Staff react quickly to stop or redirect undesirable behaviour right at the time when it occurs.

BEST PRACTICES

- When a facility provides a transportation service to pick children up at home and/or return them after the program, written parental consent is on file authorizing the program to transport the child to and from home.
- Parents are provided, in advance, with all the details of the transportation plan for all field trips or other activities that take place away from the premises.
- Before a child is transported, a signed parental consent form is on file at the facility.
- Any change to a transportation plan is communicated to parents, in writing in advance of the activity. Parental approval of the change(s) is documented on each child's signed permission slip.
- Staff show children how to monitor their own behaviour through appropriate modeling.
- Staff make every effort to anticipate and prevent behaviour problems.
- The child care program is planned to promote age appropriate interaction and avoid conflict.
- Staff actively involve children in solving their own conflicts and problems where appropriate.
- Staff use activities to help children understand social skills.
- The physical space in the day care is arranged to help children feel they have some individual autonomy.

- Staff help children to understand their inappropriate behaviours and to make more appropriate choices.
- Staff support parents in their child guidance efforts (i.e. share information, role model).

Section 12 – Transportation To and From Activities

Section 12

A ***licence holder*** must ensure that proposed supervision arrangements respecting the transportation of a child to and from any activity off the day care facility are approved in writing by a parent.

INTENT

Parents are made aware, in advance, of any activity that involves taking a child off the premises of the facility. They are best able to determine if the activity is developmentally appropriate for their child. Any concerns regarding supervision, transportation or other safety issues can then be addressed prior to the activity.

INDICATORS

- When a facility centre provides a transportation service to pick children up at home and and/or return them after the program, written parental consent is on file authorizing the program to transport the child to and from home.
- Parents are provided, in advance, with all the details of the transportation plan for all field trips or other activities that take place away from the premises.
- Before a child is transported, a signed parental consent form is on file at the facility.
- Any change to a transportation plan is communicated to parents, in writing in advance of the activity. Parental approval of the change(s) is documented on each child's signed permission slip.
- If transporting children, the facility holds an Operating Authority Certificate issued under the *Motor Transport Act* and complies with all requirements under the *Motor Transport Act*.
- All children are properly restrained at all times in private vehicles and facility-owned or operated vehicles.

- Staff/child ratios are maintained as governed by the *Day Care Regulation* when transporting children enrolled in a day care facility.
- Drivers are not included in the staff/child ratio when there are 7 or more children in the vehicle except when ECS (kindergarten) children are being transported to and from an ECS (kindergarten) program. Under this circumstance, the driver may be included in the ratio.
- Parents provide written approval in advance, for a specific time period (i.e. six months) for routine activities such as walks in the neighbourhood, walking to and from school, or visits to nearby community playgrounds.

Best Practices

- Parents are encouraged to participate in field trips with their children.
- Additional staff are available to assist with the transportation of children.
- Safety rules are reviewed with children prior to each field trip.
- Staff prepare children for outings by explaining where they are going, what will happen, who they will see and who they will need to listen to.
- Children role play any important scenarios (i.e. safety rules) before outings and discuss the event upon returning to the facility.

Section 13 – Availability of Telephone Numbers

Section 13

A ***licence holder*** must ensure that the current telephone numbers of the following are kept readily available in the day care facility:

(a) all ***staff*** members, including substitute ***staff*** members;

(b) the nearest health unit;

(c) the nearest hospital emergency centre and poison information centre;

(d) the fire department;

(e) the police service;

(f) the ambulance service.

INTENT

Staff need to be able to contact local resources for emergency assistance at all times to ensure the safety of children in the facility. The current telephone number for all resources important to the operation and safety of a day care facility need to be readily available to staff at all times.

INDICATORS

- The telephone numbers required in the regulation are immediately available and accessible to all staff at all times.
- All staff know the location of emergency telephone numbers and have access to that information.
- All information is updated on a regular basis.

BEST PRACTICES

- The facility has a policy and procedures for regularly updating information.
- All staff are informed when telephone numbers change.
- The telephone numbers identified under section 13(b)(c)(d)(e) and (f) are posted beside each telephone.

Section 14 – Accident or Illness

Section 14

In the case of an accident to or a serious illness of a child, the *licence holder* must forthwith ensure that

(a) a parent is notified, and

(b) the child receives medical attention.

INTENT

Parents need to know if their child is involved in an accident or becomes seriously ill while in care at the day care facility. To ensure that the child receives medical attention, staff will contact the parents without delay and take whatever action is appropriate.

INDICATORS

- Staff can identify the person in charge in case of an accident or illness.
- There is a written policy that outlines the procedure to be followed by staff in the case of an accident or a serious illness of a child.
- Accidents and serious illnesses are documented on an accident/illness report form.
- Documentation of accidents or serious illnesses includes details of any corrective action taken by the staff.
- The accident/illness report form includes a place for the parent's signature.

BEST PRACTICES

- The operator provides written policies and procedures to parents at the time of orientation.
- Staff are trained and knowledgeable in the policies and procedures.

- The staff maintain ongoing communication with parents when an accident or serious illness occurs.
- Parents sign all accident/illness reports.
- Parents are provided with a copy of the accident/illness report.

Section 15 – Communicable Disease

Section 15

Where a *staff* member of a day care facility knows or has reason to believe that a child may be suffering from a disease listed in Schedule 1 of the *Communicable Disease Regulation* (AR 238/85), the *licence holder* must require a parent to remove the child from the day care facility forthwith.

INTENT

Controlling communicable diseases in a day care is essential to providing a safe, comfortable, and healthy environment for all children and staff. The staff in a day care facility have an important role to play in the prevention, early detection and management of communicable diseases. If staff suspect a child has a communicable disease that may be transferred to other children or staff in the day care, it is necessary for that child's parent to remove the child from the day care facility as soon as possible. The child should return to day care only when the child is well enough to once again fully participate in the program.

INDICATORS

- There is a defined method of ensuring parents are aware of their responsibility to remove their child when there is a suspicion of communicable disease.
- There is a defined method of communicating to staff the requirement to notify the Program Director and parent of a child with a suspected communicable disease.
- Written information is available to parents informing them of the list of communicable diseases.
- Schedule 1 of the *Communicable Disease Regulation* (AR 238/85) is available to staff and volunteers. (Appendix B)
- Staff are aware of the common symptoms of communicable diseases listed in Schedule 1 of the *Communicable Disease Regulation* (AR 238/85).

- There is no evidence of a child with a communicable disease being present in the day care facility.
- There is a defined method of informing the Local Health Authority of a suspected case of a communicable disease within the day care facility.

BEST PRACTICES

- Parents are encouraged to tell staff when their child has been in contact with someone with a communicable disease.
- Written information is provided to parents at the time of enrolment outlining their responsibility to remove their child if there is suspicion of a communicable disease.
- Parents are encouraged to seek early medical treatment for their child if there is any suspicion of a communicable disease.
- Written policies and procedures are developed for staff and parents, which include the development of preventative measures.
- Written policies and procedures include the provincial requirement to report communicable diseases to the Local Health Authority.
- Staff consult with the Local Health Authority as a resource when developing policies, staff training and health promotion initiatives.
- Staff are knowledgeable and trained in prevention, early detection and management of communicable diseases.
- Staff recommend the use of, *"Well Beings"* (Canadian Paediatric Society) when addressing parent concerns regarding their child's health. This publication is available from the Canadian Paediatric Society, 2204 Walkley Road, Suite 100, Ottawa, Ontario K1G 4G8 or phone: 1-613-526-9397.
- Staff are trained in the use of universal health precautions to control the spread of communicable and contagious diseases.
- Staff model appropriate hand washing practice as a means of preventing the spread of communicable diseases.

Section 16 – Supervised Care for a Sick Child

Section 16

A ***licence holder*** must ensure that a sick child is

(a) kept as far away as is practicable from the other children, and

(b) directly supervised by a primary staff member,

until the child can be removed from the day care facility.

INTENT

Children require an environment that promotes their health and well being. To ensure the child care environment remains healthy, a sick child needs to be separated from the group and supervised by a primary staff member until the parent/guardian is able to remove the child from the day care facility. This provides comfort for the sick child and helps protect the health of other children in the playroom.

INDICATORS

- All children in the day care facility are healthy enough to participate in the program.
- There is a defined method of caring for a sick child.
- The day care provides a cot/mat, sheet, and/or blanket for a sick child.
- All supplies used by a sick child are cleaned and disinfected after use.
- Sick children are provided with a quiet, comfortable environment, away from the other children, to rest until their parent/guardian removes them from the day care facility.
- Staff know the day care's policy/practice regarding the care of a sick child.
- A primary staff member directly supervises any sick child.

BEST PRACTICES

- There is a separate space set up within the day care (i.e. office or staff room) where a sick child can be cared for under the direct supervision of a primary staff member with a valid first aid certificate.
- Written policies and procedures regarding the care a supervision of sick children are provided to parents at the time of enrolment.

Section 17 – Medication

Section 17 (1)

A ***licence holder*** may administer or allow the administration of patent or prescribed medication to a child only where

(a) the written consent of a parent has been obtained

(b) the medication is in the original labelled container, and

(c) the medication is administered according to the labelled directions.

INTENT

Good health is essential to a child's ability to learn and to grow. To maintain good health it is often essential to administer medication or herbal remedies to a child during the time the child is at the day care facility. This section of the regulation establishes standards that must be followed to ensure a child's safety when administering medication and herbal remedies. For any medication or herbal remedy to be administered, patent or prescribed, parents who have the legal responsibility for the child, need to provide written consent. Having medication and herbal remedies in their original labelled container, and administering the medication or herbal remedy according to the labelled directions, ensures children receive only their own medications or herbal remedies at the right time and in the right dosage.

INDICATORS

- The operator has a defined method of informing parents of the facility's requirements for medication and herbal remedy administration.
- Prescribed medications are in the original container and are labelled with the child's name, name of the physician, date of issue, and instructions for administration.

- Patent medication or herbal remedies are in the original container with an intact label and the child's name.
- The operator has a defined method of recording the parent's authorization to administer medication or herbal remedies to a child including: date, child's name, name of medication or herbal remedy, date and time medication or herbal remedy is to be administered, amount of medication or herbal remedy to be administered, and signature of the parent authorizing the medication or herbal remedy.
- There is documented evidence that staff have administered medications or herbal remedies according to parent authorization. Documentation includes date and time of administration, name and amount of medication or herbal remedy that was administered, and signature of staff who administered the medication or herbal remedy.

Best Practices

- There are established policies and procedures for the administration of medication and herbal remedies.
- All staff are trained in the proper and safe methods of administering medications and herbal remedies.
- Staff designated to administer medication and herbal remedies have a valid first aid certificate as defined in section 36.
- Information about the regulation, and policies and procedures for administering medication and herbal remedies is provided to parents at the time of orientation. This information is also contained in parent's written information.
- A standard form that contains all required information for administration is easily accessible to parents and staff.
- Staff have close liaison and communication with the parent to ensure they are aware of when medications or herbal remedies were administered to the child prior to arriving at the facility.
- Parents provide staff with information regarding any potential side effects of medications or herbal remedies.
- Staff observe children very carefully after administering medications or herbal remedies to be alert to any possible allergic reactions.

Section 17 (2)

(2) A ***licence holder*** must ensure that

(a) all medication, except medication that may be needed in an emergency to save a child's life, is stored in a locked container that is inaccessible to children, and

(b) medication that may be needed in an emergency to save a child's life is stored in a place that is inaccessible to children.

INTENT

Children need to be in an environment which is safe at all times. When medication or herbal remedies are required to be administered during child care hours, it is imperative that no child is able to gain access by him or herself.

INDICATORS

- Medications and herbal remedies are stored in containers with functioning locking mechanisms for both refrigerated and non-refrigerated medications and herbal remedies in the facility.
- Containers storing medications and herbal remedies are consistently locked.
- Keys for locked medication containers are stored in a location inaccessible to children.
- Medication for emergency situations is stored in an identified location that is inaccessible to children.
- Except in the case of emergency medications, medications and herbal remedies are not stored at the facility for "in case of need" situations.

Best Practices

- There are written policies and procedures regarding storage of medications and herbal remedies. Parents are provided with this information at the time of orientation. Staff are aware of the policies and procedures.
- All staff are aware of where medications and herbal remedies are stored.
- Medications and herbal remedies are returned to parents when the authorization period has ended.
- All staff are aware of which children use emergency medications, where the medications are stored, and how to administer them if necessary.

Section 18 – Health Care

Section 18

A ***licence holder*** may provide or allow for the provision of health care to a child only

(a) if the written consent of a parent has been obtained,

(b) if the health care to be provided is first aid, or

(c) if, in the case of the administration of medicine, it is administered in accordance with ***section*** 17.

INTENT

Children need to be in an environment where health care is assured. Parental consent is required to allow for the administration of health care to the child, other than First Aid. Health care is considered to be care of a physical nature over and above what would normally be provided in a day care facility. Examples of health care would be chest clapping, feeding through a tube, range of motion exercises, or special diets required for medical or other reasons.

Health care also includes the administration of medication. This section allows for the administration of medication if all indicators under section 17 are in evidence.

INDICATORS

- Written parental consent outlines specific details for any health care to be provided.
- A defined method is in place to ensure that parents are aware of the requirements to allow or provide for the provision of health care.
- The staff person administering first aid has a valid certificate as outlined in section 36.

- There is clear documentation of the facility's or parent's responsibility to supply any special provisions (i.e. special diet food).

Best Practices

- There are established policies and procedures related to the provision of health care.
- Staff are trained in the proper methods of administering the type of health care required by a child, and this training is documented in the staff's personnel file and in the child's file.
- Written details from a physician are on a child's file.

Section 19 – Smoking

Section 19 (1)(2)

(1) No person shall smoke in a day care facility.

(2) No *staff* member shall smoke at any time or place where the *staff* member is caring for children.

INTENT

Children attending day care need to be in a healthy environment where smoking is prohibited at all times. Children are particularly susceptible to adverse effects from second-hand smoke because their lungs are less developed and their rate of breathing is faster than adults. Children who are around second-hand smoke may have more illnesses such as asthma, bronchitis, pneumonia, ear infections, colds and throat infections.

INDICATORS

- Smoking is prohibited anywhere on the licensed premises.
- Staff are prohibited from smoking whenever they are caring for children. This applies to any excursion off the premises including field trips, walks, and while at community playgrounds.

BEST PRACTICES

- Staff promote good health in children by ensuring they are not exposed to smoke at any time while in their care.

- Staff promote good health by modeling behaviour that does not encourage smoking.

Section 20 – Meals and Snacks

Section 20

A ***licence holder*** must

(a) provide or require parents to provide meals and snacks to the children, and

(b) ensure that meals and snacks provided to the children

(i) are in accordance with Canada's Food Guide as approved by the Canadian Council on Nutrition or in accordance with other similar guidelines, and

(ii) are provided at appropriate times and in sufficient quantities in accordance with the needs of each child.

INTENT

Children experience rapid growth and development making good nutrition especially important. A healthy diet provides the energy and essential nutrients that children need to grow, develop, and be active. It also develops children's sense of taste, acceptance, and enjoyment of a variety of food, forming the basis of lifelong eating habits. Children need to be served sufficient quality, variety, and quantity of food at appropriate times to ensure their daily nutritional needs are met.

Staff need to be aware of all allergies and food restrictions, as well as hazardous foods that can cause choking. It is important that the responsibility for providing meals and snacks is communicated to parents by a defined method. The use of approved nutritional guidelines such as the Canada Food Guide establishes a standard for achieving a balanced diet for children. It will also serve as a valuable tool to streamline choices for meals and snacks.

INDICATORS

- Parents authorize in writing, food restrictions based on medical reasons, cultural, or religious preferences.
- Menu plans follow the Canada Food Guide or a similar guideline. There is evidence that meals and snacks include a variety of well-balanced, nutritious food.
- Children receive meals and snacks at appropriate times. Morning and afternoon snacks each provide one serving from two or more of the basic food groups. Lunch includes one serving from each of the four food groups and children receive two servings of milk products daily.
- Sufficient quantities and varieties of food are available. Extra servings are available for children if they request it.
- Staff are aware of children who have food allergies and/or special diets.
- Foods that present a risk of choking are not served and other caution foods are modified before serving. (e.g. hot dogs and grapes are sliced lengthwise)
- Meal and snack schedules meet individual children's needs.
- There is a defined method of informing parents of their responsibility (if required) to provide meals and snacks.
- The facility has additional food and drink available to supplement food brought by parents.

BEST PRACTICES

- Staff are knowledgeable about nutrition. They encourage healthy eating by discussing the importance of proper nutrition with children.
- Staff responsible for food storage and preparation have completed a food handler's course.
- Resource materials and information on nutrition is made available to staff and parents. (e.g. Canada Food Guide)
- During the initial orientation, parents receive written information outlining responsibility for meals and snacks.
- Nutritional requirements, proper amounts and variety of foods are discussed with parents where appropriate.
- Meals and snacks are prepared to meet children's preference's as well as their nutritional needs.

- Food is presented in appealing ways, combining different colours, textures, and shapes of food.
- Menus are developed and retained for a minimum of three months.

Section 21 – Menus

Section 21

A ***licence holder*** must make available to ***staff*** and parents, in a form and manner approved by ***a director***, information on the food to be provided by the ***licence holder***.

INTENT

Staff and parents need to be aware of the food being served to children. This information allows parents and staff to work together to ensure children receive adequate daily nutrition. Individual allergies or food restrictions are more easily identified when parents and staff are aware of the daily foods to be provided.

INDICATORS

- Menus for all foods to be served for meals and snacks are planned in advance.
- There is a defined method of communicating, to parents and staff, the foods to be served.
- Staff and parents are made aware of any changes before the food is served.

BEST PRACTICES

- Food is varied from day to day with no more than one or two repetitions in a month.
  Menu information is posted in a visible location for parents. Communication is encouraged about food items and nutritional value.
- The upcoming menu is included in the day care centre's newsletter so that parents can review the menu.

- All menu changes are recorded. Substitutions are within the same food group.
- Menus are discussed with and approved by a Nutritionist.

Section 22 – Manner of Feeding

Section 22

A ***licence holder*** must ensure that the manner in which the children are fed is appropriate to their age and level of development.

INTENT

Children need to be fed appropriately for their age and developmental level. Infants need to be held during feeding to promote feelings of security and attachment. As infants are introduced to solid foods, their developmental needs must be taken into consideration to determine whether they should be held by staff members or seated in infant seats or high chairs during feeding. Older children are fed appropriately with the proper sized utensils and in a supervised environment where staff interact with children and model appropriate behaviour. Children's safety is considered as well as their age, level of development, and individual needs when determining the most appropriate manner of feeding for each child.

INDICATORS

- Younger infants who cannot hold their own bottle are held and fed by staff.
- Staff supervise children closely during meal and snack times.
- Infant seats, high chairs, and appropriately sized tables and chairs are used.
- Children are provided with utensils that are appropriately sized for their age and stage of development.
- Staff sit with children and interact warmly to make meals a time for conversation.
- Children help during meals and snacks by setting the table, serving themselves and wiping up spills.
- Child-sized "serving" utensils are used to make self-help easier (i.e. small pitcher).
- Staff and parents cooperate to promote good eating habits.

Best Practices

- Staff model appropriate behaviour, by interacting with children and encouraging social skills.
- Staff encourage the progression of children's self-help skills.
- Bottles are removed from cribs/cots as soon as children fall asleep.

Section 23 – Keeping of Records

Section 23 (1)(2)

(1) A ***licence holder*** must keep in the day care facility, in respect of each child, up-to-date records that comply with subsection (2) and must ensure that those records are available for inspection by ***a director*** at all times and by the child's parent when practicable.

(2) The records must include

(a) a current, signed and completed enrolment form,

(b) the name, date of birth, health care registration number and current home address of the child,

(c) the name, current home address and telephone number of the child's parent,

(d) the address and telephone number of the place where the child's parent and another person to whom the child may be released can be reached in case of an emergency,

(e) the name and telephone number of the child's physician,

(f) except in the case of a drop-in centre, the date when the child became enrolled in the day care facility program and when the child ceased to be enrolled in the day care facility program.

(g) particulars of the child's daily attendance, including arrival and departure times, in a form that is satisfactory to ***a director***,

(h) particulars of the administration of any medication pursuant to ***section*** 17, including the kind of medication, the time of administration, the amount administered, the initials of the person administering and the written consent of a parent, and

(i) particulars of any health care provided pursuant to ***section*** 18, including the written consent of a parent, and

(j) written confirmation of the child's immunization and any other health information provided by a parent.

INTENT

To ensure children's health and safety it is essential that accurate, up to date records are completed for each child. Accurate attendance records ensure that a child's participation in the program is accurately recorded and that the legal responsibility for the child is clear.

In the event of an emergency, accurate attendance records are critical to ensure that all children are accounted for.

INDICATORS

- An organized record is maintained and readily available for each child participating in the program.
- Every child's record contains all of the required information as outlined in section 23(2)(a)(b)(c)(d)(e)(f - except in the case of a drop in centre)and (j).
- Information regarding medication taken on a regular basis is included on the child's record.
- Every child's registration record is updated at least once every six months and as any changes to the information occur.
- Children's attendance records are accurately completed at arrival and departure time.
- Records for all children currently attending the program are kept on the day care premises.
- All attendance records are completed in ink and signed by parents.
- All records are kept on the premises for a minimum of two years after the date they were created.

BEST PRACTICES

- Parents are provided with the day care's written policy regarding record keeping requirements at the time of enrolment.
- A written procedure is in place to ensure regular updating of records.
- All staff are oriented to the importance of accurate record keeping.
- All staff are trained in the facility's procedure for recording and updating child information.
- Records are filed in a manner that maintains confidentiality.
- Medication taken on a regular basis is recorded on a child's record.

Section 23(3)

(3) In the case of a day care centre, the ***licence holder*** must also keep in the day care centre up-to-date records available for inspection by ***a director*** at all times that include

(a) particulars of the daily attendance of each primary staff member, including arrival and departure times and hours spent providing child care, in a form that is satisfactory to ***a director***, and

(b) a copy of

(i) the qualification certificate of, or

(ii) an exemption issued under ***section*** 34 in respect of,

the program director and each primary staff member.

Intent

The intent of this section is to support an accountability process that demonstrates adherence to the primary staff member to child ratio requirements and the staff qualification requirements for day care centres as outlined in sections 27, 28, 29, 30 of the *Day Care Regulation*.

Indicators

- Only hours spent in direct child care as a primary staff are recorded for this purpose.
- Staff accurately complete their attendance records in ink as they sign in and out of child care.
- Staff Qualification Certificates, or letters confirming level of exemption are available on-site for inspection.
- Staff attendance records and Staff Qualification Certificates are retained on-site for the period required in section 23(5).

BEST PRACTICES

- The Staff Qualification Certificates or letters confirming level of exemption for all primary staff members are displayed where parents can easily view them.
- Whenever there is a status change for a staff member, the operator updates the Staff Qualification Certificate on display so that parents can see the most current status of that staff member.

Section 23 (4)(5)

(4) In the case of a drop-in centre, the ***licence holder*** must also keep in the drop-in centre up-to-date records available for inspection by ***a director*** at all times that include particulars of the daily attendance of each primary staff member, including arrival and departure times and hours spent providing child care, in a form that is satisfactory to ***a director***.

(5) The ***licence holder*** must retain the records required by this ***section*** for

(a) as long as the child or ***staff*** member, as the case may be, to whom the records relate is enrolled in or on the ***staff*** of the day care facility, or

(b) at least 2 years following the end of the year in which the records were created

whichever is longer.

INTENT

To support an accountability process for drop-in-centres that demonstrates adherence to the staff member to child ratio requirements as outlined in section 32(1) of this regulation.

INDICATORS

- Attendance records include only the hours that a primary staff member spends involved in direct child care.
- All attendance records are kept on the drop in centre premises for a minimum of two years after the date they were created.
- Staff accurately complete their attendance records in ink as they sign in and out of child care.

BEST PRACTICES

- All staff are trained in the drop in centre's procedure for the recording of attendance records.
- All records are kept in an organized and confidential manner.
- When portable emergency information is taken off site, it is stored in a backpack which remains with staff at all times.

Section 24 – Portable Emergency Information Record

Section 24 (1)(2)

(1) A ***licence holder*** must maintain a portable record of emergency information that complies with subsection (2) and must ensure that it is taken on emergency evacuations and on field trips and other activities of the day care facility.

(2) The emergency information must include:

(a) in respect of each child who is expected to be taken from the day care facility, the information required by ***section*** 23 (2)(b),(c),(d),(e) and (j), and

(b) the current telephone numbers of the nearest hospital emergency centre and poison information centre.

INTENT

Staff always have ready access to emergency information for each child in their care. Portable emergency records allow for ready access to this information at all times including when children are off the licensed premises.

INDICATORS

- The day care has a "Portable Emergency Information Record" for each child in attendance.
- Staff are able to easily access the portable emergency information in case of any emergency.
- The portable emergency information record for each child is complete and current.

- Staff take the portable emergency information with them any time they take children off the day care premises.
- Every child's registration record is update at least once every six months and as any changes to the information occur.

BEST PRACTICES

- Emergency information is recorded on a separate card for each child. The card is kept in the child's home room.
- When staff take the portable emergency information off the licensed premises, they keep it in a backpack or other carrying device so it is easily accessible at all times.
- Medication taken on a regular basis is recorded on a child's portable emergency information record.

PART 3 - STAFFING

Section 25 – Qualification Certificates

Section 25 (1)(2)(3)(4)(5)

(1) In this ***section***, "college" means a public college as defined in the *Colleges Act*.

(2) A person may apply to the ***Minister*** for a qualification certificate at ***level 1, 2 or 3***.

(3) The ***Minister*** must issue a ***level 1 qualification certificate*** to an applicant who

(a) has completed an orientation course for day care centre staff that is approved by the ***Minister***, or

(b) has completed course work that the ***Minister*** considers to be equivalent to an orientation course referred to in clause (a).

(4) The ***Minister*** must issue a ***level 2 qualification certificate*** to an applicant who

(a) has received a one-year certificate in early childhood development or education from a college, or

(b) has completed course work that the ***Minister*** considers to be equivalent to the course work required for a certificate referred to in clause (a).

(5) The ***Minister*** must issue a ***level 3 qualification certificate*** to an applicant who

(a) has received a two-year diploma in early childhood development or education from a college, or

(b) has completed course work that the ***Minister*** considers to be equivalent to the course work required for a diploma referred to in clause (a).

INTENT

All primary staff and program directors need to apply for certification.

Documentation or evidence to support an individual's request for assessment must be submitted to the Staff Qualifications Office for their review. This process should commence when a student completes a course.

Applicants who disagree with the status or certification level awarded to them are provided an opportunity to request a second review.

INDICATORS

- The applicant is informed of the results of their assessment within 90 days of their request.
- Certification is based solely on educational credentials, not work experience.
- All staff have their original qualification certificates on file at the day care, available for inspection.
- Each certification level indicates that the individual has completed the requirements or equivalencies that are outlined in Appendix C in this manual.

BEST PRACTICES

- Staff submit evidence of course work within 30 days of completion.

Section 26 – Cancellation of Certificate

Section 26

Where the ***Minister*** is satisfied that a qualification certificate was issued based on false or inaccurate information, the ***Minister*** may cancel the certificate by providing written notice of the cancellation to the person to whom it was issued.

Intent

Staff qualifications are an essential component of providing quality child care. Therefore, the integrity of the information that is provided to the Staff Qualifications Office must be assured. If a staff member has provided false or inaccurate information about their credentials, the Minister will notify the individual and the licence holder in writing, that the individual's qualification certificate has been cancelled.

Indicators

- All information contained in the certification application is true and correct.
- All staff hold valid qualification certificates.

Best Practices

- Official transcripts of course work support educational credentials.

Section 27 – Program Director

Section 27

A ***licence holder*** for a day care centre must ensure that a full-time program director who holds a ***level 3 qualification certificate*** is on the ***staff*** of the day care centre at all times.

INTENT

Supervising the daily on-site operation of the day care centre is the responsibility of a program director who holds a level 3 qualification certificate. The level of training required for a level 3 certificate prepares a program director to plan and implement a program that is based on developmentally appropriate child care practices. It is understood that the program director may not be on-site during all hours of operation, but it is expected that each day care centre has a full time program director position.

INDICATORS

- The program director has a level 3 qualification certificate or exemption.
- The program director is regularly on site at the day care centre.
- The program director provides direct child care; supervises/orients staff; develops and implements children's programs and handles administrative tasks.
- All staff at the facility can identify the program director to parents, licensing staff or visitors.
- If two staff members are sharing a program director position, both individuals hold a level 3 qualification certificate, or level 3 exemption.
- A full time program director only fills a position at one day care centre.

Best Practices

- The program director supervises all aspects of the child care program.
- The program director's workload is balanced between administrative tasks and direct child care responsibilities.
- A program director is available to meet with parents during operational hours.
- The program director is involved in the hiring and regular performance reviews of primary staff members.

Section 28 – Alternate Program Director

Section 28 (1)(2)

(1) Subject to subsection (2), a ***licence holder*** for a day care centre must ensure that a primary staff member with a ***level 2 or level 3 qualification certificate*** is designated to supervise the operation of the day care centre when a program director is not at the day care centre.

(2) Where ***a director*** is of the opinion that there will be no risk to the safety and well-being of the children in a day care centre, the director may, in writing, authorize the program director to designate a primary staff with a ***level 1 qualification certificate*** to supervise the operation of the day care centre when the program director is not at the day care centre.

INTENT

It is recognized that on occasion, a full time program director may be absent from the day care centre for short periods of time. On these occasions, it is important for the program director to designate a staff member who has a level 2 or level 3 qualification certificate or exemption to supervise the operation of the day care centre.

There are however, certain circumstances when the day care operator may wish to have a person with a level 1 qualification certificate designated to supervise the operation of the day care centre in the absence of the program director. Before an operator can make these arrangements there must be assurance for a director as defined under the *Social Care Facilities Licensing Act*, that there is no risk to the safety and well being of the children in the day care centre. A director may authorize this designation in writing to the centre's program director upon a written request from the operator.

NOTE: A "director" is defined as the CEO or representative of the Child and Family Service Authority where the day care centre is located.

INDICATORS

- All staff working at the facility can identify the alternate program director
- If the program director is absent from the day care centre during operating hours, another primary staff member with at least a level 2 qualification certificate or a level 2 exemption is designated as the alternate program director.

OR

- When a primary staff member with at least a level 2 qualification certificate (or a level 2 exemption) is not available to act as the alternate program director, the day care centre has written approval from the CFSA to have a staff member with a level 1 qualification certificate act as the alternate program director and supervise the operation of the day care centre. This would occur only in unique circumstances.

BEST PRACTICES

- The program director selects a staff member to act as an alternate program director on the basis of their training, experience, maturity, knowledge of the operation of the day care centre and familiarity with the parents and children.
- One consistent staff member acts as the alternate program director.
- When a primary staff member acts as the alternate program director for a prolonged period of time, or for a significant period of the day, there is additional staff to maintain the required staff/child ratio.

Section 29 – Primary Staff Members – Day Care Centres

Section 29

A **licence holder** for a day care centre must ensure that, of the total number of primary staff members who are on duty at the day care centre and who are included in the calculation of the minimum primary staff member to children ratio under **section** 30,

(a) at all times between 8:00 a.m. and 4:30 p.m., at least one in every 4 holds a ***level 2 or level 3 qualification certificate*** and all the others hold a ***level 1 qualification certificate***, and

(b) at all other times of the day, everyone holds at least a ***level 1 qualification certificate***.

INTENT

Primary staff significantly impact the quality of child care. Children in the care of trained staff exhibit more cooperative behaviour, higher levels of language skills and general knowledge, and greater task persistence. It is therefore essential that all staff who work directly with children have at least the minimum level of training (level 1 qualification certificate).

Staff members with level 2 or 3 qualification certificates have received additional training that will enable them to enhance the quality of a day care's program. These staff can make the greatest impact by providing direct child care during the peak hours of the day when the majority of the children are present. Staff with level 2/3 exemptions have not completed the same amount of course work as those staff who hold level 2/3 certificates.

INDICATORS

- The staff to child ratio is calculated by including only the primary staff members who provide direct child care (i.e. a program director holding a level 3 qualification certificate will only be included in the ratio calculation while the individual is acting as a primary staff member providing direct child care).
- During all hours of operation, all primary staff members hold at least a level 1 (or level 1 exemption) qualification certificate.
- Between 8:00 am. and 4:30 p.m., one in every four required staff holds a level 2 (or level 2 exemption) or level 3 (or level 3 exemption) certificate. The following chart outlines the number of primary staff members that need to hold a level 2 or level 3 qualification certificate

Number of Primary Staff Required to be on Duty	Number of Level 2 or 3 Primary Staff Required
1-4	1
5-8	2
9-12	3
13-16	4

- Cover off for a level 2 or 3 primary staff member is provided by a primary staff member with a minimum of a level 1 qualification certificate for coffee breaks, lunch breaks or appointments.

BEST PRACTICES

- Primary staff members hold a level 3 qualification certificate.
- Primary staff members with level 2 and level 3 qualification certificates are allocated between various groups of children in the day care centre.
- Primary staff members holding level 2/3 qualifications are available during all hours of operation.

Section 30 – Ratios for Maximum Numbers – Day Care Centres

Section 30 (1)

(1) Subject to this **section**, a **licence holder** for a day care centre must ensure that the following minimum primary staff member to children ratios, and the maximum number of children who may be included in a group, in the day care centre are in effect at all times.

Age of Children	Primary Staff Member/Children Ratio	Maximum Number of Children in a Group
Under 13 months	1:3	6
13 months or over, but under 19 months	1:4	8
19 months or over, but under 3 years	1:6	12
3 years or over, but under 4½ years	1:8	16
4½ years or over	1:10	20

INTENT

Two indicators of quality in child care settings and major contributors to positive outcomes for children, are staff/child ratios and maximum group size.

Children need care by consistent caregivers who are responsible for the same group of children each day. This enables children in each group to have frequent personal interactions with their caregiver and to develop a trusting relationship. Children will then feel confident that their caregivers are available to meet their needs.

Group size is one predictor of positive group interaction, verbal communication skills, cooperative behaviour and cognitive abilities.

INDICATORS

RATIOS

- Primary staff member to child ratios are in place at all times (including field trips and while primary staff members are on scheduled breaks).
- Primary staff members who are walking with or are passengers in a vehicle transporting children are included in the staff to child ratios for children being transported, but are not included in ratios at the centre while they are absent from the centre.
- Drivers are not included in the primary staff member to child ratios where there are 7 or more children in the vehicle.
- When Early Childhood Services children are transported, a ratio of 1 primary staff member to 10 children is in place. The driver may be included in the ratio for Early Childhood Services children only.
- Program directors are included in the ratio only when they are working directly with the children.
- Primary staff member to child ratios are always adequate to ensure appropriate supervision.
- Primary staff members involved in support functions such as cooking or cleaning, are not included in the staff to child ratio during the time they are performing these support functions.
- Practicum students are not included in the staff to child ratio unless: the college has approved the inclusion; the students are performing duties as primary staff members; and the practicum is being completed in their place of employment.

MAXIMUM GROUP SIZE

- The number of children in a group at any one time does not exceed the maximum group size for that age group.
- Children are part of a consistent group with consistent primary staff members each day from 8:00 to 4:30.
- There is an area for children to call home (i.e. a home room or home area).

BEST PRACTICES

- The minimum staff to child ratio requirements are exceeded.
- Additional staff are present during field trips or special activities.
- One of the two primary staff responsible for supervising any designated maximum group stays with that group, including times when children are sleeping, or when staff are on breaks.
- Relief staff are assigned to a consistent designated group.
- Children have a home room or home area with consistent staff all day.

Section 30 (2)

(2) A **licence holder** for a day care centre must ensure that the following minimum primary staff member to children ratios in the day care centre are in effect at all times while children are sleeping:

Age of Children	Primary Staff Member/ Children Ratio
Under 13 months	1:6
13 months or over, but under 19 months	1:8
19 months or over, but under 3 years	1:12
3 years or over, but under 4½ years	1:16
4½ years or over	1:20

INTENT

For children's health and safety, it is essential to have adequate supervision by staff who are knowledgeable of procedures to safely evacuate children in an emergency situation.

Supervision of all sleep areas is of critical importance. Children need to be reassured that staff are close by to comfort them if necessary. In the event of an emergency situation, staff can act immediately to protect children.

This section addresses the reduced supervision needs of sleeping children, however, ensures that there is direct supervision by staff.

INDICATORS

- The required number of primary staff members are present at all times when children are sleeping.

- Sleeping children are directly supervised by primary staff members who are present in the same room and immediately available to any child.
- For children who are not sleeping, primary staff to child ratios, as outlined in section 30(1) are in effect.
- Children who are not sleeping are provided with alternate activities.

Best Practices

- Staff are knowledgeable about procedures to safely and efficiently evacuate napping children in an emergency situation.
- Infant room ratios as outlined in section 30(1) are maintained at all times to accommodate for individual sleeping patterns.
- The infant sleeping area is separate from active play and eating areas.
- Children who do not nap are able to go outside or to another room and play under the supervision of primary staff.

Section 30 (3)

(3) Where a group of children in a day care centre includes children from 2 or more of the age groups specified in subsection (1) or (2), as the case may be,

(a) the number of primary staff members required for the purposes of the primary staff member to children ratio in that subsection is to be determined by taking the sum of the proportions of the primary staff member requirement prescribed by the applicable ratio for each child in the group, and

(b) the ***licence holder*** must ensure that the composition of the group is such that the sum of the primary staff requirement calculated in accordance with clause (a) does not exceed 2.0.

INTENT

This section ensures that primary staff member to child ratios are in place in mixed age groups. Mixed age groups (family groups) consist of children from different age categories.

Mixed age groups are recommended only for children aged 3 years to 6 years. Children younger than 3 years usually need to be separated from the more boisterous play of older children and will have their developmental needs best met by being grouped with other children of the same age group (e.g. 0-12 months; 13-18 months; 19 months-3 years) or, grouped only with other children under 3 years of age (e.g. 0-18 months; 19 months-3 years).

INDICATORS

- The method used by the day care to group children is outlined in their approved service plan.
- The primary staff member to child ratio is in place at all times.

- The primary staff member to child ratio for a mixed age group has been calculated by adding the proportion of primary staff required for each child in the mixed age group.
- For mixed age groups (children of different ages), the number of primary staff is determined by adding the proportion of a primary staff member required for each child in the group. When a portion of a primary staff member is required, the number of staff required is rounded up to the next whole number.
- Children are part of a consistent group with consistent primary staff members each day from 8:00 a.m. to 4:30 p.m.

Best Practices

- The minimum staff to child ratio requirements are exceeded.
- Additional staff are present during field trips or special activities.
- One of the two primary staff responsible for supervising any designated maximum group stays with that group, including times when children are sleeping, or when staff are on breaks.
- Relief staff are assigned to a consistent designated group.
- Children have a home room or home area with consistent staff all day.

Section 30 (4)

(4) The limitation imposed by subsection (1) on the number of children who may be included in a group does not apply to a group referred to in subsection (3) if the composition of the group complies with subsection (3).

INTENT

This section indicates that when children are in mixed age groupings, the maximum number of children permitted in a group as indicated in section 30(1) does not apply.

INDICATORS

- The number of children within a mixed age group does not require more than two primary staff in order to meet the staff to child ratio requirements.

Section 30 (5)

(5) In this ***section***, "primary staff member" means a primary staff member who holds a qualification certificate or in respect of whom an exemption from ***section*** 29 has been issued under ***section*** 34.

Intent

Children need to receive care from primary staff members who are of an appropriate age and who have knowledge about early childhood development.

Indicators

- All primary staff members are 16 years of age or older.
- All primary staff members hold a qualification certificate or a valid exemption.
- Primary staff members are not work experience or life skills program students.
- A practicum student is considered a primary staff member only if the college has approved the inclusion; the student is performing duties as a primary staff member; and the practicum is being completed in their place of employment.

Best Practices

- All primary staff members are 18 years of age or older and hold a qualification certificate.
- Practicum students are in addition to the required primary staff to child ratio.

Section 31 – Ratios - Nursery Schools

Section 31

A ***licence holder*** for a nursery school must ensure that the following minimum primary staff member to children ratios in the nursery school are in effect at all times:

Age of Children	Primary Staff Member/ Children Ratio
Under 19 months	1:6
19 months or over, but under 3 years	1:10
3 years or over, but under 5 years	1:12
5 years or over	1:15

INTENT

Children require adequate supervision at all times. In a nursery school setting, primary staff to child ratios determine the maximum number of children that a primary staff member can care for and still meet each child's individual needs. A primary staff member for this section may include the nursery school teacher, aides, parent volunteers and other adult volunteers.

INDICATORS

- The primary staff member to child ratio is in place at all times including field trips and when transporting children.
- A driver is not included in the staff to child ratio when 7 or more children are being transported in a vehicle.
- If a parent volunteer brings an additional child(ren) to the nursery school who is not enrolled in the nursery school program (e.g. a sibling), that parent is not

included in the primary staff to child ratio. The non-enrolled child is not included as part of the licensed capacity of the nursery school. The parent is solely responsible for the care of the non-enrolled child.

- For mixed age groups (children of different ages), the number of primary staff is determined by adding the proportion of a primary staff member required for each child in the group. When a portion of a primary staff member is required, the number of staff require is rounded up to the next whole number.

Age of Children	Number of Children	Number of Primary Staff
3 years or over, but under 5 years Ratio 1:12(1/12 = .083)	9	9/12 (or .083) x 9 = .747
5 years or over Ratio 1:15(1/15 = .067)	11	11/15 (or .067) x 11 = .737
TOTALS	20	1.48

Required number of primary staff members = 2

NOTE: Mixed age groupings are recommended only for children aged 3 years to 6 years. Children younger than 3 years usually need to be separated from the more boisterous play of older children. Children under 3 years of age should be in either same age groups (e.g. 0-12 months; 13-18 months; 19 months-3 years) or grouped only with other children under 3 years (e.g. 0-18 months; 19 month-3 years).

BEST PRACTICES

- Additional adults are available for field trips or special activities.
- Parent participation is encouraged as part of the daily program.

Section 32 – Ratios and Maximum Numbers - Drop-in Centres

Section 32 (1)(2)(3)

(1) Subject to this ***section***, a ***licence holder*** for a drop-in centre must ensure that the following minimum primary staff member to child ratios, and the maximum number of children who may be included in a group, in the drop-in centre are in effect at all times:

Age of Children	Primary Staff Member/Children Ratio	Maximum Number of Children in a Group
Under 19 months	1:5	10
19 months or over, but under 3 years	1:8	16
3 years or over, but under 5 years	1:12	24
5 years or over	1:15	30

(2) Where a group of children in a drop-in centre includes children from 2 or more of the age groups specified in subsection (1),

(a) the number of primary staff members required for the purposes of the primary staff member to children ratio in that subsection is to be determined by taking the sum of the proportions of the primary staff member requirement prescribed by the applicable ratio for each child in the group, and

(b) the ***licence holder*** must ensure that the composition of the group is such that the sum of the primary staff requirement calculated in accordance with clause (a) does not exceed 2.0.

(3) The limitation imposed by subsection (1) on the number of children who may be included in a group does not apply to a group referred to in subsection (2) if the composition of the group complies with subsection (2).

INTENT

Drop-in day care facilities require adequate primary staff members to ensure the health, safety and well-being of children using the facility.

Primary staff members provide children with a sense of security and belonging. They promote interactions that are sensitive and responsive between children and staff. These interactions should be frequent, individual, personal and developmentally appropriate.

Mixed age groupings enable children to learn from one another and encourage interactions where children naturally help and support one another. Staff to child ratios and group size are essential for the provision of appropriate levels of care giving.

INDICATORS

- Primary staff member to child ratios are in place at all times.
- The number of children in a group at any one time does not exceed the maximum group size.
- Staff to child ratios are always adequate to ensure appropriate supervision.
- For mixed age groups (children of different ages), the number of primary staff is determined by adding the proportion of a primary staff member required for each child in the group. When a portion of a primary staff member is required, the number of staff required is rounded up to the next whole number.
- Staffing members involved in support functions such as cooking or cleaning are not included in the staff to child ratio during that time.

Best Practices

- Additional staff over and above the minimum requirements are available for increased one-to-one interactions.
- Staff members have training in early childhood development.

Section 33 – Minimum Staff Requirements

Section 33 (1)(2)

(1) Without limiting ***sections*** 30, 31 and 32, a ***licence holder*** must ensure that

(a) when 7 or more children are present at a day care facility, at least 2 adult ***staff*** members are on duty in the day care facility, at least one of whom is a primary staff member, and

(b) no ***staff*** member under 18 years of age is solely responsible for the supervision of the children.

(2) For the purposes of subsection (1)(a), in the case of a day care centre, "primary staff member" means a primary staff member who holds a qualification certificate or in respect of whom an exemption from ***section*** 29 has been issued under ***section*** 34.

INTENT

To ensure that children are safe at all times, there must always be sufficient staff available. When ratios require two staff or when there are 7 or more children in attendance, a minimum of two adult staff members must be on duty. Staff members must be aware that they are responsible for the children at all times.

INDICATORS

- Two adult staff members are present when there are seven or more children, even if ratios do not require a second staff.
- In the case of a day care centre, at least one of the two adult staff members holds a qualification certificate or exemption at the appropriate level.
- Primary staff to child ratios are maintained at all times.
- Any staff member left alone to supervise children is 18 years of age or older.

Best Practices

- Each child has a home room or home room area and is consistently cared for by the same primary staff.
- The facility has additional staff on duty above the required staff ratios.
- Skilled and qualified caregivers are available to interact with the children's family members during the early morning and late afternoon.

Section 34 – Exemptions

Section 34

The ***Minister*** may, in writing, exempt a ***licence holder*** from any qualification requirement of ***section*** 27 or 29 in respect of a specific ***staff*** position if the ***Minister*** is satisfied that

(a) the ***licence holder*** has made every reasonable effort to fill the position with a qualified person, or

(b) the person selected to fill the position is engaged in the course work necessary to obtain the qualification certificate otherwise required for the position.

INTENT

Trained staff are a key component to providing a developmentally appropriate environment for children attending day care. Exemption are requested when staff of the day care do not have the necessary certifications to meet the requirements as outlined for primary staff members and program directors in sections 27 and 29. Exemptions support and recognize the centre's efforts to recruit staff with appropriate levels of certification as well as the individual staff person who is engaged in course work to attain the next level of certification. Exemptions may be granted for a specific period of time provided certain conditions are met.

INDICATORS

- The operator of the day care has applied in writing for an exemption from a qualification requirement for a specific staff position.
- The staff member is aware when an exemption has been made on his or her behalf.

- The staff member holds a qualifications certificate for the level preceding the exemption level being requested.
- A copy of the exemption request (including proof of advertisement or ongoing registration), or approval of exemption request is on site.
- Program directors and primary staff members all have a registration number.
- Exemption approvals are specific to an individual and the day care centre, and are not transferable.

Best Practices

- Staff are encouraged and supported to complete training requirements equivalent to level 3 certification.
- Exemptions are requested only for those staff pursuing further training in Early Childhood Development.

Section 35 – General Supervision Requirement

Section 35

Not withstanding ***sections*** 30 to 33, a ***licence holder*** must ensure that the children are, at all times while they are present at, or involved in activities arranged by the day care facility, under such supervision as is adequate to ensure the development, safety, and well-being of the children.

INTENT

Young children are not always a good judge of danger and require constant and careful supervision to assure their physical well-being. "Supervision as is adequate" is defined to include the number of staff required to supervise the children (staff/child ratio), how staff involve themselves with the children and the nature and type of activity the children are engaged in. Potentially dangerous situations may be prevented when staff position themselves strategically throughout the indoor or outdoor play space. When children see that staff are close at hand, it helps to remind them of the expectations and it also enables staff to intervene quickly when required. Staff must be knowledgeable of procedures to safely evacuate children in an emergency situation.

INDICATORS

- Staff are located at different points in the indoor and outdoor environment in order that all the children can be seen at all times.
- When a staff member is engaged with one child or a small group of children, they continue to maintain an awareness of the whole group.
- Staff adjust their supervision appropriately to meet the needs of children of different ages and abilities.
- Staff carefully observe, intervene proactively, and react quickly to solve issues in a comforting and supportive manner.

- When children are involved in potentially hazardous activities (e.g. swimming, water play, woodworking, cooking, field trips and new or unfamiliar situations), staff take additional precautions.
- Staff focus on the children, not on other tasks or interests.
- Staff/child ratios are adequate to provide a safe environment taking into account the nature and type of activity.
- When children are asleep, staff are in the same room with the children and continue to actively supervise.

Best Practices

- Staff consider each child's learning needs when they provide supervision.
- Staff balance the need for children to be independent with the requirement to provide support and ensure their safety.
- Children are supervised by staff who actively encourage them to develop age appropriate social interactions (i.e. taking turns).
- When children are away from the licensed facility, there are additional staff (above the required staff ratio) accompanying them.

Section 36 – First Aid Staffing

Section 36

A ***licence holder*** must ensure that at least one of every 4 ***staff*** members who provide care to children at any time in a day care facility holds a valid first aid certificate acceptable to ***a director***.

INTENT

Requiring staff to have first aid training ensures that a qualified person is readily available in the event of an emergency. Staff trained in first aid are better able to make an informed decision regarding the need for further medical attention.

INDICATORS

- One in every four staff has proof of completion of valid First Aid Training. "Valid first aid certificate" means a current certificate in child care. Valid first aid certificates are as follow:
- One in every four staff who are available to the children while in the day care facility, or while involved in an activity arranged by the day care facility, have a valid first aid certificate.

BEST PRACTICES

- All staff in the day care centre (including those not in direct child care) have a valid first aid certificate.
- Staff with a valid first aid certificate are designated to administer medication and to protect children in case of an allergic or adverse reaction to a medication.

- Volunteers are trained in first aid.
- All first aid certificates are posted in the day care facility.

PART 4 - TRANSITIONAL PROVISIONS, REPEALS, EXPIRY AND COMING INTO FORCE

Section 37 – Transitional Provisions

Section 37

A person who holds a licence under the *Day Care Regulation (AR 333/90)* immediately before the coming into force of this Regulation is deemed to hold the same licence as if issued under this Regulation.

INTENT

Licence holders who were licensed under the 1990 *Day Care Regulation* are considered "licensed" under the 2000 *Day Care Regulation.*

Section 38 – Repeal

Section 38

The *Day Care Regulation (AR 333/90)* is repealed.

INTENT

To clarify that the *Day Care Regulation (AR 180/2000)* replaces (AR 333/90).

Section 39 – Expiry

Section 39

For the purpose of ensuring that this Regulation is reviewed for ongoing relevancy and necessity, with the option that it may be repassed in its present or an amended form following a review, this Regulation expires on October 31. 2005.

INTENT

This ensures that the Regulation is reviewed.

Section 40 – Coming Into Force

Section 40

The Regulation comes into force on October 31, 2000.

PART 5 - APPENDICES

Appendix A – Criminal Record Checks

Criminal Record Check Policy for implementation by all day care licence holders.

Criminal records checks (also called security clearances) must be conducted on all new employees, and volunteers, including anyone over 12 years of age who has the opportunity to be in direct and regular contact with children cared for in child care centres, drop-in centres and approved family day homes. Criminal record checks shall also be conducted on new licence applications for day care centres, and drop-in centres.

The employer hiring staff or using volunteers has the primary responsibility for ensuring that a thorough screening, including criminal records checks, is conducted for all prospective employees and volunteers.

A Criminal Record Check is a computerized scanning of the National Repository for Criminal Records in Canada, conducted, upon application of the individual, by local police authorities to determine whether a criminal record exists, based on the name and birth date given.

The actual criminal records check documentation obtained from police is considered the private property of the applicant and must remain with them. This requirement is consistent with the intent of the privacy legislation.

Persons using criminal records checks are cautioned that the information in the National Repository for Criminal Records in Canada is limited, as it generally contains information on only the most serious of offences (i.e., those for which individuals are fingerprinted). It may not contain information relevant and of importance to screening for child care workers.

There may also be delays or omissions in forwarding information to the Repository by local authorities and the information may not be up to date. These limitations highlight the need for those hiring employees or approving volunteers, to establish and continue using sound and thorough recruitment practices in addition to a criminal records check.

Appendix B – Communicable Diseases Regulation (Alta Reg. 238/85)

SCHEDULE 1

Acquired Immunodeficiency Syndrome (AIDS)
Amebiasis
Anthrax
Arboviral Infections (including Dengue)
Botulism
Brucellosis
Campylobacter
Cerebrospinal fluid isolates
Chickenpox[1]
Cholera
Congenital Infections (includes Cytomegalovirus, Hepatitis B, Herpes Simplex, Rubella, Toxoplasmosis, Varicella-zoster)
Dengue
Diphtheria
Encephalitis, specified or unspecified
Enteric Pathogens. See note below
Foodborne Illness. See note below
Gastroenteritis, epidemic. See note below
Giardiasis
Haemophilus Influenzae Infections (invasive)
Hemolytic Uremic Syndrome

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[1] Chicken pox is listed on Schedule 1 of the *Communicable Diseases Regulation* (AR 238/85) and is applicable to Section 15 of the *Day Care Regulation* (AR 180/2000).

Current practice of most Regional Health Authorities does not require that the child with chickenpox be removed from the day care facility because the transmission of the virus from the infected child occurs primarily before the pox (rash) appears. Excluding a child from day care does not prevent others from becoming infected. Children with chicken pox may return to the day care as soon as they feel well enough to participate in normal activities.

Alberta Health and Wellness is currently reviewing the *Communicable Diseases Regulation* (AR 238/85).

Hepatitis A, B, Non-A, Non-B
Kawasaki Disease
Lassa Fever
Legionella !nfections
Leprosy
Leptospirosis
Listeriosis
Malaria
Measles
Meningitis (all causes)
Meningococcal Infections
Mumps
Neonatal Herpes
Nosocomial Infections
Ophthalmia Neonatorum (all causes)
Paratyphoid
Pertussis
Plague
Poliomyelitis
Psittacosis
Q-fever
Rabies
Reye Syndrome
Rickettsial Infections
Rocky Mountain Spotted Fever
Rubella (including Congenital Rubella)
Rubeola
Salmonella Infections
Shigella infections
Smallpox
Stool Pathogens, all types. See note below
Tetanus
Toxic Shock Syndrome
Trichinosis
Tuberculosis
Tularemia
Typhoid
Typhus
Varicella

Viral Hemorrhagic Fevers (including Marburg, Ebola, Lassa, Argentinian, African Hemorrhagic Fevers)
Waterborne Illness (all causes) See note below
Yellow Fever

NOTE: Enteric Pathogens, Foodborne Illness, Gastroenteritis, epidemic and Waterborne Illness include the following and any other identified or unidentified cause: Aeromonas; Bacillus cereus; Campylobacter; Clostridium botulinum and perfringens; E. Coli (enteropathogenic serotypes); Salmonella; Shigella; Staphylococcus; Viruses such as Norwalk and Rotavirus; Yersinia.

Appendix C – Early Childhood Education Subject Areas

Child Development	Programming	Relationships	Practicum	Related Courses
Social development Physical development Intellectual development Creative development Emotional development Language development Health, safety and nutrition Observing and recording Theories of child development Infant/toddler development Exceptional development	Introduction to early childhood Planning preschool programs Learning through play Preschool play experiences: . art . drama . literature/storytelling . math . social studies . music/movement . science/nature	Child guidance Interpersonal communication Child abuse/neglect Child/family/ community relations Issues in early childhood education Early childhood professionalism and ethics	Field placement in an early childhood setting	English composition Liberal arts (e.g., introductory psychology, sociology) Specialized study (e.g., administration, management) School age care Elementary education

Level 2 - Basic

120 hrs	145 hrs	60 hrs	400 hrs	45 hrs* [TOTAL: 770 hrs]

* must complete a minimum of one college level written English course

Level 3 - Advanced (includes Level 2 hours)

165 hrs	295 hrs	180 hrs	800 hrs	105 hrs [TOTAL: 1,545 hrs]

Note: Cultural and ethnic diversity must be part of all early childhood courses.

Appendix D – Reference List of Child Care Websites

If you are interested in researching a topic related to child care, you may wish to refer to one or more of the following websites for current information.

Child and Family Canada
www.cfc-efc.ca

This website provides resources on children and families with an extensive library on online documents in the areas of children and families.

Child Care Resource and Research Unit
www.childcarecanada.org

The Child Care Resource Research Unit focuses on early childhood care and education research and policy. The website highlights new research findings and provides ongoing updates on current research projects in early childhood care and education. The site contains a section on child care policy with provincial, federal and international policy developments.

Canadian Child Care Federation
www.cccf-fcsge.ca

CCCF's message is to improve the quality of child care services for Canadian families. CCCF sponsors "Research Connections Canada" which is an anthology of current Canadian early childhood research and development papers. Services and programs are targeted to direct service providers, child care organizations, educational institutions, government policy makers and public opinion leaders.

Centre for Families, Work and Well-Being
www.worklifecanada.ca

The website provides research and education on work/life issues to promote individual and family well-being.

SpeciaLink: The National Centre for Child Care Inclusion
www.specialinkcanada.org

SpeciaLink provides personalized responses to specific questions, referrals to other organizations and sources of help, information and technical assistance to expand the quality and quantity of opportunities for inclusion in child care, recreation, education and other settings, to young children with special needs and their families.

National Child Care Information Centre
www.nccic.org

This is the website of the American Child Care Bureau in the Department of Health and Human Resources, the department which administers federal child care programs. The site includes excellent information on current child care research in the United States (with many posted research reports); State child care profiles; government initiatives; the *Child Care Bulletin*; and a long list of links to American child care organizations.

Early Childhood Research and Practice
www.ecrp.uiuc.edu/

This website is a peer-reviewed electronic journal sponsored by ERIC Clearinghouse on Elementary and Early Childhood Education of the University of Illinois covering topics related to the development, care and education of children from birth to 8. This site emphasizes articles reporting on practice-related research and development, and on issues related to practice, parent participation and policies.

Contemporary Issues in Early Childhood
www.triangle.co.uk/ciec/

Contemporary Issues in Early Childhood with a focus on education research.

Connect for Kids
www.connectforkids.org

Provides solutions oriented coverage of critical issues for children and families including child care and early development.

National Institute on Early Childhood Development and Education
www.ed.gov/offices/OERI/about.html

The Institute was created to carry out a comprehensive program of research, development, and dissemination to improve early childhood development and learning.

National Association for the Education of Young Children
www.naeyc.org

The US National organization of early childhood educators and others is dedicated to improving the quality of programs for children from birth to third grade. The website contains position statements including program practices and policies of early childhood programs.

Eric Clearinghouse on Elementary and Early Childhood Education
www.ericeece.org

Eric Clearinghouse on Elementary and Early Childhood Education is a national education information system funded by the US Department of Education and designed to provide resources and information on education.

The National Network for Child Care
www.nncc.org

This site is an internet source of over 1,000 research based publications related to child care. NNCC's goal is to share knowledge about children and child care from the resources of universities with parents, professionals, practitioners and the general public.

The World Bank Group
www.worldbank.org

Website contains selected internet resources on Early Childhood Development and related topics. Priority has been given to sites of international importance.

Child Care Journals
www.childcarejournals.com

This website offers child care journals to track the well-being of children while at child care and aid in the communication between provider and parent.

GLOSSARY

Glossary

"a director"

The *Day Care Regulation* is administered by the Child and Family Services Authorities (CFSAs). There is "a director" designed for each Authority.

"level 1 qualification certificate"

This level of certification is issued to a person who has completed the government's Orientation Course or equivalent course work of 50 hours or more that is related to Early Childhood Education.

"level 2 qualification certificate"

This level of certification is issued to a person who has:

- completed a one year Early Childhood Education certificate program offered by an Alberta public college, or an equivalent level of training
- completed a four year Bachelor of Elementary Education from a recognized post secondary institution.

"level 3 qualification certificate"

This level of certification is issued to a person who has completed a two year Early Childhood Education diploma program offered by an Alberta public college, or an equivalent level of training.

"licence holder"

The individual (company, partnership or society) responsible for the operation of the day care centre, drop-in centre or nursery school.

"Minister"

The Minister of Children's Services.

"section"

The dividing of the Regulation into specific areas. Each section of the Regulation is numbered.

"staff"

Means primary staff member whose duty is child care and who is actively engaged in the supervision, safety, well-being and development of the children.

Comment Form

Comment Form

Licensing Standards and Best Practices in Child Care

This comment form is provided as our invitation to you to share any comments or concerns you may have about the content or format of this manual.

If you have a concern, issue or problem please provide the details in the space provided on the reverse. Along with your concern, please provide a recommendation of how we could better address your concern in a future revision to this manual.

If you concern relates to monitoring, please direct it to your Child and Family Services Authority Child Care Office.

Please note that all comments will be given consideration within the context of the intent of the *Day Care Regulation* and current research on quality child care.

Please use a separate page for each comment. Feel free to make copies of this form.

Date: _____

Your Name: _____

Your Address: _____

Town/City: _____ Postal Code: _____

Telephone: _____

Name of Day Care Centre: _____

You may return this comment form by:

Fax: (780) 415-0651 or **Mail**: Service Support, Service Quality
Alberta Children's Services
11th Floor, Sterling Place
9940 – 106 Street
Edmonton AB T5K 2N2

Reference in the Manual

What section of the Regulation does your concern relate to?

Section: _____

Page Reference in this Manual: _____

Your Comment

Recommended Solution

Thank you for taking the time to share your concern.